State of California—Health and Welfare Agency Form Approved OMB No. 2050—0039 (Expires 9-30-91) Please print or type. (Form designed for use on elite (1.

## See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services
Toxic Substances Control Division
Sacramenta California

1000	print of type. (Form designed for use on eine (12-pnch typewmer).					Sacramento, Canforni	
1	CAD VOIC 1202		nifest nent No. 09 1	2. Page 1 of		on in the shaded areas juired by Federal law.	
STREETS	3. Generator's Name and Mailing Address PARA PLATE			A. State Manifest Document Number 88346409			
	15910 SHOEMAKER AVE., CERRITOS 4. Generator's Phone (213) 404-3434	3	B. State General ~ z iD				
20	5. Transporter 1 Company Name 8. US EPA ID Number			C. State Transporter's ID			
52-75	OMEGA RECOVERY SERVICES   ICAD 042  245   001			D. Transporter's Phone (213) 698-0991			
98-00 8-00	7. Transporter 2 Company Name  8. US EPA ID Number			E. State Transporter's ID F. Transporter's Phone			
CALL 1-800-852-7550				G. State Fecility's ID			
	12504 E. WHITTIER BLV.	12504 E. WHITTIER BLV.			one	81412JOIQ14	
O 4 O 3	WHITTIER, CA. 90602 CAD	942 245 001		(X213) 698-0991.			
150 150 150	11. US DOT Desc intion (Including Proper Shipping Name, Hazard Class, a	nd ID Number)	No.		uantity	Unit Waste No.	
XXXVII.	K WASTE ORM-A N.O.S., ORM-A NA (Flexosolvent)	1693				State: 211,212	
MHHW :	(Flexosofvenc)		2018	PI MODE	2140	6 F001, F003	
902; V	b.					State	
24-88				1 1 1		EPA/Other	
9 8	c.					State	
8-1						EPA/Other	
NTE	d.					State	
U C						EPA/Other	
PONS	J. Additional Descriptions for Materials Listed Above a.—Material For Recycle  K. Handling Codes for Wastes Listed Above a.—Material For Recycle b.						
RES	c d					d.	
ONAL							
CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802;	15. Special Handling Instructions and Additional Information Profile #B10016 *Emergency # (213) 404-3434						
THE							
ALL	16.						
SPILL, C	GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and						
1 33	national government regulations.  If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined						
γ O	to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, II I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is evallable to me and that I can afford.						
SENC	Printed/Typed Name	Signature		18 18		Month Day Year	
WER WER	Frank E. Hernandez	Fresh		Heim		2 1017013811	
AN E	17. Transporter 1 Acknowledgement of Receipt of Materials  Printed{Typed Name	Signature	11	1		Month Day Year	
OF A	KOBERT J CIRINGEON	Stahl				MASIONA	
CASE OF AN EMERGENCY OR	18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name	Signature				Month Day Year	
3 B							
F	19. Discrepancy Indication Space						
A C							
Ĺ	20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Y	Printed/Typed Name N. JAY SOLOMON	Signature	1.	11	2 24 24	Month Day Year	
1	1 JATI SULUMIUN.		( de	( Jours	non	10/00/11	

EPA 8700--22 (Rev. 9-88) Previous editions are obsolete. Do Not Write Below This Line

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS